



DEPARTMENT OF HEALTH SERVICES

177- STREET
SACRAMENTO, CA 95814

January 1, 1985

To: All County Welfare Directors
All County Administrative Officers

Letter No. 85-1

INSTRUCTIONS FOR IMPLEMENTING MEDI-CAL INTERCOUNTY TRANSFER REGULATIONS

This letter is to provide instructions for implementing the revised Medi-Cal Intercounty Transfer (ICT) regulations which became effective August 6, 1984 and to transmit a draft of the remaining ICT regulations which are anticipated to be adopted in January 1985.

Effective January 1, 1985, any eligible Medi-Cal beneficiary who moves from one county to another within the State to make his or her home is to be transferred in accordance with the attached regulations. The previous ICT regulations which concerned applicant responsibility to apply for a redetermination and effective date of transfer apply to beneficiaries transferred after August 6, 1984. The remaining ICT regulations transmitted in this letter concern county department responsibilities and are effective January 1, 1985.

The following are procedural questions raised by counties regarding the new ICT regulations.

Question:

What is the sequence of events if all entities (beneficiary, County "A" and County "B") fulfill all responsibilities in a timely manner during the inter-county transfer of a case? Assume that a beneficiary comes into an office in County "A" on December 10, 1984 and notifies the county that he/she has moved to County "B" effective this same date (Title 22, California Administrative Code, (CAC) Section 50185(a)(8)).

Answer:

The following example illustrates the regulatory requirements:

1. Title 22, CAC, Section 50136(a)(1) requires County "A" to inform the beneficiary in writing of the responsibility to apply for a redetermination in County "B". County "A" provides a copy of the Redetermination Reminder to the beneficiary (use of AFDC's ABCDM 215A is recommended for this purpose).
2. By December 17, 1984, County "A" completes and mails two copies of the notification of transfer to County "B" (form ABCDM 215) Title 22, CAC, Section 50136(a)(1)(A)). Enclosed in the mailing with the ABCDM 215, or within one week after the form is sent, are all documents required by CAC, Section 50136(a)(1)(B). The ABCDM 215 form establishes January 31, 1985 as the end of the transfer period (Title 22, CAC, Section 50137(a)).

3. Title 22, CAC, Section 50136(a)(1)(D) requires County "A" to send County "B" other information considered important to determine eligibility. For example, if income or circumstances change, County "A" is responsible for sending to the beneficiary adequate notice of action (NOA) (timely if the action is adverse) of any change in eligibility or share of cost (SOC) amount for January. County "A" should send County "B" copies of the updated MC 177, the budget worksheet and NOA.
4. The beneficiary applies for a redetermination of eligibility in County "B" (Title 22, CAC, Section 50185(a)(8)). County "A" gives the beneficiary a deadline to apply for a redetermination in County "B" via the ABCDM 215A. If the beneficiary complies, County "B" will process the redetermination. If the beneficiary fails to apply for a redetermination by this deadline, County "B" issues a timely notice of discontinuance. The discontinuance is rescinded if the beneficiary applies for a redetermination on or before its effective date. Otherwise, the discontinuance stands and the request for redetermination is treated as a new application.
5. Between December 21, 1984 and January 20, 1985, County "B" should accomplish the following:
 - o Perform a redetermination of eligibility by processing the information received from County "A", including all forms included with the ABCDM 215 and MC177 (Title 22, CAC, Section 50136(a)(3)(A)).
 - o Complete Section "B" of the ABCDM 215 and return a copy to County "A" (Title 22, CAC, Section 50136(a)(3)(B)).
 - o Continue eligibility effective February 1, 1985 if the beneficiary is eligible and send an adequate NOA approving eligibility (Title 22, CAC, Section 50136(a)(3)(C)).
 - o Send a timely NOA to discontinue if the beneficiary is no longer eligible (Title 22, CAC, Section 50136(a)(3)(C)).
 - o Send a timely NOA if SOC increases (Title 22, CAC, Section 50136(a)(3)(C)).

County "A" should contact County "B" if form ABCDM 215 is not received from County "B" within 30 days to assure continued Medi-Cal eligibility (Title 22, CAC, Section 50136(a)(4)).

Question:

County "B" receives an ABCDM 215 from County "A" on December 13, 1984. The period expires on January 31, 1985. If the beneficiary fails to apply for redetermination before January 31, 1985, what are the notice of action requirements for County "A" and/or County "B"?

Answer:

County "A" is required by Title 22, CAC, Section 50136(a)(1) to inform the beneficiary in writing of his/her responsibility to apply for a redetermination of eligibility in County "B". This requirement is met by giving or sending the Redetermination Reminder (ABCDM 215A) to the beneficiary indicating the date by which the beneficiary must apply, in this example by January 15, 1985.

By January 21, 1984 County "B" sends the beneficiary a timely NOA to discontinue eligibility for failure to apply for a redetermination of eligibility (Title 22, CAC, Section 50136(a)(3)(C)). As indicated in the previous question, if the beneficiary does eventually apply for a redetermination before the effective date of the NOA, the NOA should be rescinded and a redetermination performed.

There are no additional notice requirements relating to the transfer. County "A" may give notice to terminate its responsibility for eligibility effective the end of the transfer period, or may provide a message for this purpose on the ABCDM 215A. Neither the notice or the message is required by regulation.

Question:

What is the responsibility of County "B" where the beneficiary applies for a redetermination of eligibility in County "B", but County "B" has not received an ABCDM 215 from County "A"?

Answer:

Title 22, CAC, Section 50185(a)(8) places the responsibility on the beneficiary to promptly notify the county who initially determined eligibility (County "A") of his/her move to a second county (County "B"). County "B" should advise and assist the beneficiary to notify County "A" of the move. County "A" should send form ABCDM 215 to "County "B" upon notification from the beneficiary of the move. (Title 22, CAC, Section 50136 (a)(1)).

Question:

What is the responsibility of County "B" when the recipient applies for a redetermination in that county within the transfer period, but fails to return for an interview scheduled to complete the redetermination?

Answer:

County "B" should send a notice of action to discontinue aid for failure to cooperate in completion of the redetermination. The notice of action must meet the requirements of Title 22, CAC, Section 50179.

All County Welfare Directors
County Administrative Officers

-4-

Question:

Which county is responsible for responding to state hearing requests by beneficiaries who are discontinued for failure to cooperate?

Answer:

County "B" is responsible for state hearing representation and payment of aid paid pending if the appeal is filed timely. (County "A"'s ABCDM 215A is not a NOA per se. A beneficiary's appeal based on dissatisfaction with the ICT — procedure explained in that form would still be handled by County "B".)

Attached are the remaining regulation changes which include post hearing amendments pursuant to input received at CWDA. We anticipate the regulation changes to be adopted in December 1984. You are instructed to implement them upon receipt of this letter.

If we may be of further assistance, please call Vivian Gannon of my staff at (916) 324-4966, ATSS 454-4966.

Sincerely,

Original signed by

Gary Pettigrew for
Doris Z. Soderberg, Chief
Medical Eligibility Branch

Attachment

cc: Medi-Cal Liaisons
Medi-Cal Program Consultants

MG756VG

) Amend Section 50136 by amending subsection (a)(1) and (3) to read as follows:

50136. Intercounty Transfer Procedure. (a) An intercounty transfer shall be initiated if persons or families receiving Medi-Cal-only become the responsibility of a new county. The transfer shall be accomplished in accordance with the following procedures, as modified by Section 50138.

(1) The county department initiating the transfer shall inform the beneficiary in writing of his/her responsibility to apply for a redetermination of eligibility in the new county of residence and, within 44 7 calendar days of the date the county department learns of the change in county of responsibility, send the following to the county department in the new county of responsibility:

(A) Two copies of the Notification of Transfer, ABCDM 215, with Section A completed indicating the date of discontinuance determined in accordance with Section 50137.

(B) With the ABCDM 215, or within one week after this form is sent One copy of the most recently completed of each of the following items:

1. Application for Public Social Services, CA 1.
2. Statement of Facts, MC 210, MC 250 or CA 2.
3. Share of Cost Determination -- MN and MI Persons, MC 176M.

50136 - 2

4. Allocation/Special Deduction Worksheet, MC 176W, if any.

5. Property Worksheet, MC 176P, if any.

6. Rights of Persons Requesting Medi-Cal, MC 216, if any.

7. Medi-Cal Responsibilities Checklist, MC 217, if any.

8. Verification of disability, if any.

9. Notification of Action, Utilization of Property, form MC 239U, if the person or family is within a six month utilization period at the time of transfer.

(C) The amount, if any, of a remaining adjustment for decreases in income pursuant to Section 50567.

(D) Other information that the initiating county considers important in order for the new county of responsibility to determine eligibility.

(2) The initiating county, if the person or family becomes the responsibility of a third county during the transfer process, shall:

the former new county department that the transfer is cancelled.

50136 - 3

(B) Request the former new county department to forward to the county department of the current new county of responsibility all information and documents supplied by the initiating county and any additional information secured by the former new county.

(C) Send to the current new county department two copies of form ABCDM 215 with Section A completed indicating the date of discontinuance determined in accordance with Section 50137.

(3) The county department in the new county of responsibility shall:

(A) ~~Accept the determination of eligibility made by the initiating county department until~~ Perform a redetermination is required, unless a change in circumstances or conflicting information necessitates a new of eligibility determination, if the conditions of Section 50136(a)(1) are met.

(B) Return to the initiating county department one copy of form ABCDM 215 within 30 days of receipt of the form. Section B shall be completed, indicating acceptance or refusal of the transfer, and the effective date of eligibility, if eligibility is approved in the new county.

(C) Send a Notice of Action to the person or family, if their eligibility is approved. A Notice of Action must also be sent to the person or family if their eligibility is discontinued for failure to apply for a redetermination or family is no longer eligible. Such action shall be effective the date established in accordance with Section 50137.

50163 - 4

(4) The initiating county department shall send a Notice of Action discontinuing the person or family effective the date established in accordance with Section 50437. If form ABCDM 215 has not been returned within 30 days, the initiating county shall contact the new county to assure that continuous Medi-Cal coverage will be provided to the extent that eligibility exists.

NOTE: Authority: Sections 10725 and 14124.5, Welfare and Institutions Code.

Reference: Sections 11053 and 14016, Welfare and Institutions Code.

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the person or